

Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete If Known	
FEE TRANSMITTAL For FY 2009		Application Number	10/542,189-Conf. #2696
		Filing Date	July 14, 2005
		First Named Inventor	Shiro KANEGASAKI
		Examiner Name	L. E. Edwards
		Art Unit	1797
		Attorney Docket No.	1752-0172PUS1
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27			
TOTAL AMOUNT OF PAYMENT	(\$)	180.00	

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify):	
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments	

FEE CALCULATION

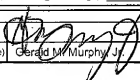
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	330	165	540	270	220	110	
Design	220	110	100	50	140	70	
Plant	220	110	330	165	170	85	
Reissue	330	165	540	270	650	325	
Provisional	220	110	0	0	0	0	

2. EXCESS CLAIM FEES		
Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	52	26
Each independent claim over 3 (including Reissues)	220	110
Multiple dependent claims	390	195

Total Claims 3 - 20 or HP = <input type="checkbox"/> x <input type="checkbox"/> = <input type="checkbox"/>	Extra Claims Fee (\$): <input type="checkbox"/>	Fee Paid (\$) <input type="checkbox"/>	Multiple Dependent Claims Fee (\$): <input type="checkbox"/>	Fee Paid (\$) <input type="checkbox"/>
HP = highest number of total claims paid for, if greater than 20.				
Indep. Claims 1 - 3 or HP = <input type="checkbox"/> x <input type="checkbox"/> = <input type="checkbox"/>	Extra Claims Fee (\$): <input type="checkbox"/>	Fee Paid (\$) <input type="checkbox"/>		
HP = highest number of independent claims paid for, if greater than 3.				

3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).				
Total Sheets - 100 = <input type="checkbox"/>	Extra Sheets /50 = <input type="checkbox"/>	Number of each additional 50 or fraction thereof (round up to a whole number) x <input type="checkbox"/>	Fee (\$) <input type="checkbox"/>	Fee Paid (\$) <input type="checkbox"/>

4. OTHER FEE(S)	
Non-English Specification, \$130 fee (no small entity discount)	
Other (e.g., late filing surcharge): 1806 Submission of an Information Disclosure Statement	180.00

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	28,977
Name (Print/Type)	Gerald M. Murphy Jr.	Telephone	(703) 205-8000
		Date	DEC 24 2008